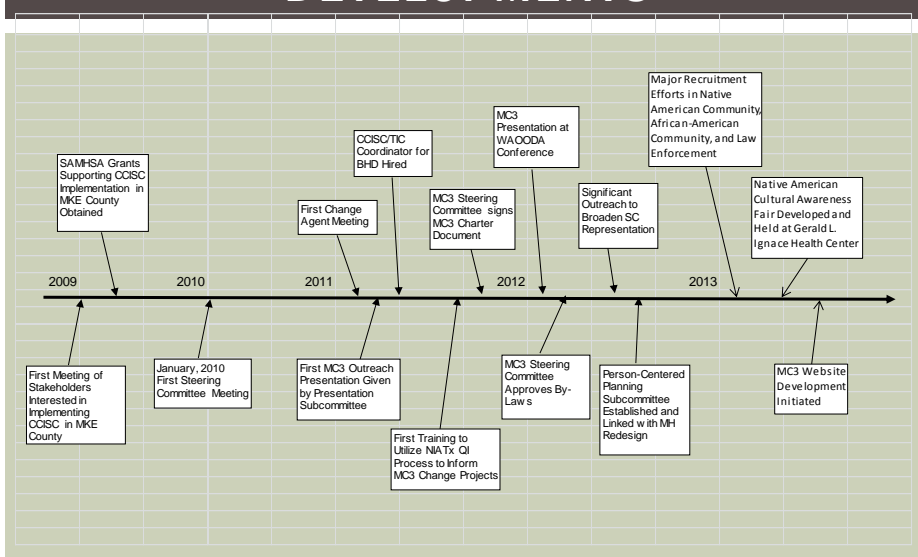




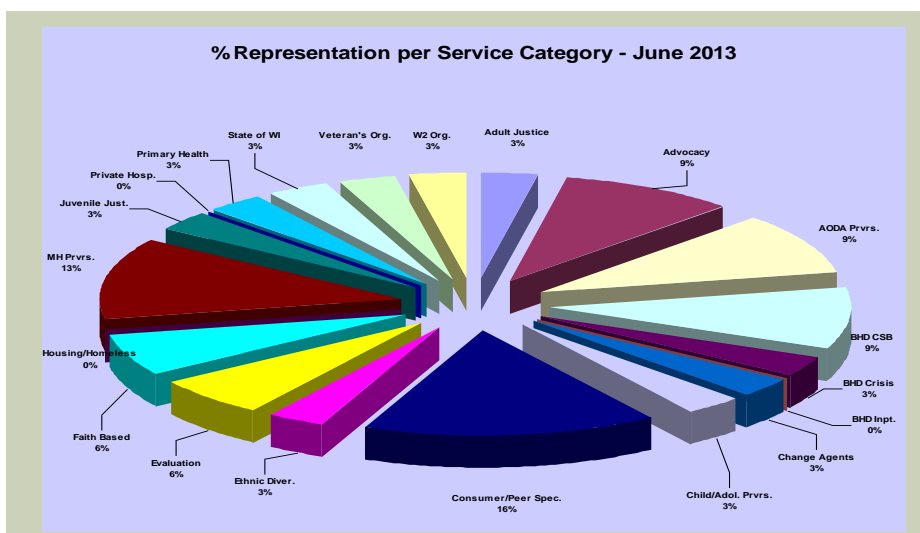
MC3 TIMELINE OF MEANINGFUL DEVELOPMENTS



WHO WE ARE

- 31 Steering Committee Members Representing Consumers, Providers, Education, Cultural, County Agency, State Agency, Law Enforcement constituencies representing a system that is recovery-oriented, person-centered, trauma informed, culturally intelligent, co-occurring capable, and welcoming
- Over 440 Unduplicated Change Agents throughout our community, 143 of which have attended at least four (4) change agent meetings.
- Over 80 organizations and entities represented.

RECRUITMENT EFFORTS AND MEMBERSHIP REPRESENTATION



**MILWAUKEE CO-OCCURRING
MC3 COMPETENCY CADRE**

OUR CHALLENGE:
Many people seeking behavioral health services have both mental health and substance abuse issues, as well as other complex needs.

OUR MISSION:
To create a community system where the people seeking help engage in meaningful partnerships with the people providing help.

OUR GOAL:
Every person and program in the MC3 will become welcoming, trauma-informed, recovery-oriented, and co-occurring capable.

WHAT WE DO:

- Improve the quality of life for the people we serve.
- Build partnerships among community agencies and other stakeholders, sharing diverse practices and perspectives.
- Empower and engage leadership at every level of an organization.
- Provide technical assistance for Continuous Quality Improvement (CQI) projects.
- Facilitate regular skill-building trainings and educational opportunities for those providing help.

WHO WE ARE:

- Mental health service providers
- Substance use service providers
- Current & former service recipients of all ages
- Other healthcare providers
- Private & public systems
- State & local administrators
- Advocates & families
- Hundreds of participants from dozens of organizations... and growing!

WHAT OUR MEMBERS SAY:

I would highly recommend all agencies embrace this model. It's the right thing to do for those you serve... and it's inexpensive and effective!
- Mental Health America of Wisconsin

We will continue our commitment to MC3 on an operational and leadership level in order to make the health care system a person-centered community more welcoming to all we serve.
- Alternatives in Psychological Consultation

Our agency has become a more welcoming community, one in which members are acknowledged for their resilience and have opportunities to strengthen it, all the while inspiring and being inspired by their peers.
- Grand Avenue Club

A change engine, a focused movement, a fresh start with vision, purpose, and momentum.
- Medical College of Wisconsin

We stay involved because we want to be part of the conversation as we move closer to a "one door" system.
- Meta House

Whether you answer the phone, work in IT or accounting, or meet with clients, these concepts are easy to understand and really resonate with everyone.
- IMPACT

GET INVOLVED!
To learn more about MC3 or to support our efforts and join this movement, contact Amy Moebius at amy.moebius@milwaukeemc3.com or 414-257-5413!

STEERING COMMITTEE

- 31 Members with two co-chairs
- Five Subcommittees
 - Person Centered Care/Culturally Intelligent Subcommittee
 - Evaluation Subcommittee
 - Presentation Subcommittee
 - Recruitment and Representation Subcommittee
 - Charter Document Subcommittee (as needed)

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

TO CREATE AN ENVIRONMENT WHERE PEOPLE SEEKING HELP FOR CO-OCCURRING ISSUES CAN ENGAGE IN PARTNERSHIPS WITH
SERVICE PROVIDERS THAT ARE GROUNDED IN THE PRINCIPLES OF RECOVERY.

MC3 Annual Objectives

- Improve welcoming and service accessibility in the MC3, its contract agencies, and existing community resources.
Status: Partially Accomplished. List items from process measures in additional document. Operationalize welcoming and CCISC principals.
Teach service providers and people in recovery how to engage in recovery partnerships that are capable in meeting complex needs across systems.
Status: 2011- 4 Trainings
2012- 8 Trainings; 2013- 4 Trainings
- Train a corps of change agents, including people in recovery, committed to recovery-oriented capacity-building in their programs and across the system.
Status: Partially Accomplished. Currently 80 agencies participating and over 400 Change Agents

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

TO CREATE AN ENVIRONMENT WHERE PEOPLE SEEKING HELP FOR CO-OCCURRING ISSUES CAN ENGAGE IN PARTNERSHIPS WITH
SERVICE PROVIDERS THAT ARE GROUNDED IN THE PRINCIPLES OF RECOVERY.

MC3 Annual Objectives (cont.)

- Successfully implement NIATx projects to improve multiple need capability/recovery-oriented services.
Status: Partially Accomplished. Currently 28 agencies trained, implementing projects
- Establish a cross-walk capability among service providers and systems to provide accurate and timely data to monitor progress at the individual and program levels.
Status: Development Phase. Building an on-line database & library
- Improve effective utilization of available financial resources to support co-occurring/recovery-oriented services.
Status: Partially Accomplished. Written into RFPs and Contracts for 2012 and 2013.
- Establish an ongoing partnership with local and state government to integrate system redesign.
Partially Accomplished. BHD, Redesign, DHS, Dual Recovery Group, statewide partners.

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

TO CREATE AN ENVIRONMENT WHERE PEOPLE SEEKING HELP FOR CO-OCCURRING ISSUES CAN ENGAGE IN PARTNERSHIPS WITH SERVICE PROVIDERS THAT ARE GROUNDED IN THE PRINCIPLES OF RECOVERY.

Annual Process Indicators

- Number of MC3 agencies that undergo the CCISC assessment process, e.g. COMPASS-EZ and CODECAT-EZ.
Status: Partially Accomplished. 15 agencies trained. 6 agencies completed, 3 agencies in IDDT process
- Number of MC3 agencies that organize a Continues Quality Improvement Process.
*Status: Partially Accomplished. *28 NIATx projects reported.*
- Number of change agents, including people in recovery, engaged in the MC3 process.
Status: Partially Accomplished. Over 400 Change Agents 6/13

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

Milwaukee Co-Occurring Competency Cadre (MC3) Charter

Actions Steps for Milwaukee County Behavioral Health Division:

1. Begin a process of adopting this Charter as an official policy statement, and disseminate officially to all stakeholders.
2. Work in a quality improvement partnership with providers and stakeholders.
3. Encourage and communicate to all providers and participants mechanisms for tracking and promoting participation, so that they may attain co-occurring capability.
4. Ensure the core principles of MC3 are integrated with all other initiatives.

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

Milwaukee Co-Occurring Competency Cadre (MC3) Charter

Actions Steps for Milwaukee County Behavioral Health Division (cont.):

5. Provide consultation, training and technical assistance for the system, providers, and participants.
6. Develop the expectation of welcoming access for individuals and families with co-occurring disorders presenting to our system.
7. Begin a process to facilitate the ability of each program to screen for and report information on individuals with co-occurring disorders, beginning with simple data on the prevalence of individuals and families with co-occurring conditions.
8. Support ongoing development of a cadre of change agents representing the county, providers, and participants/families/other stakeholders.

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

Milwaukee Co-Occurring Competency Cadre (MC3) Charter

Action Steps for all other MC3 Participants (Steps 5-7 for Clinical Service Agencies only):

1. Adopt this Charter and the principles of the CCISC model.
2. Participate in MC3 Change Agent and/or Steering Committee meetings, and disseminate that information broadly as relevant to others.
3. Identify leadership and Change Agents who are interested in creating a core quality improvement team within the agency.
4. Enhance relationships with other agencies and community partners to build mutual support and collaboration.

MC3 MILWAUKEE CO-OCCURRING COMPETENCY CADRE

Milwaukee Co-Occurring Competency Cadre (MC3) Charter

Action Steps for all other MC3 Participants (Steps 5-7 for Clinical Service Agencies only) cont.:

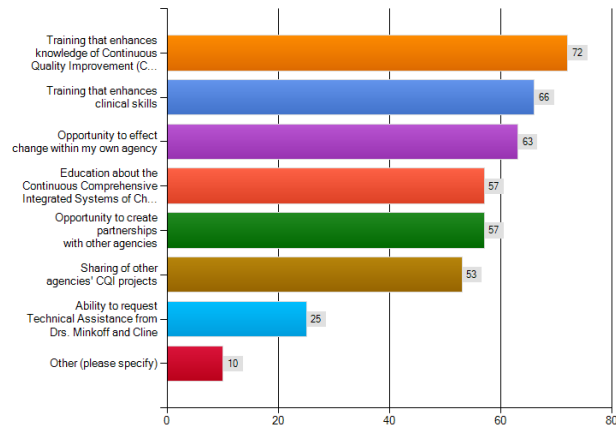
6. Survey each agency program using the COMPASS-EZ or IDDT assessment tools on an annual basis.
7. Develop a program-specific quality improvement action plan based on the survey which outlines measurable changes to move toward co-occurring disorder capability.
8. Provide stage-matched interventions for individuals and families with co-occurring conditions.

CHANGE AGENTS

- 440 Unduplicated Change Agents Have Attended One Meeting.
- 268 Have Attended At Least Two Meetings (61%).
- 202 Have Attended At Least Three Meetings (46%).
- 143 Have Attended At Least Four Meetings (32.5%).
- Approximately 82 Organizations Have Had At Least One Change Agent Attend At Least One Meeting.
- 28 NIATx Projects Recorded.

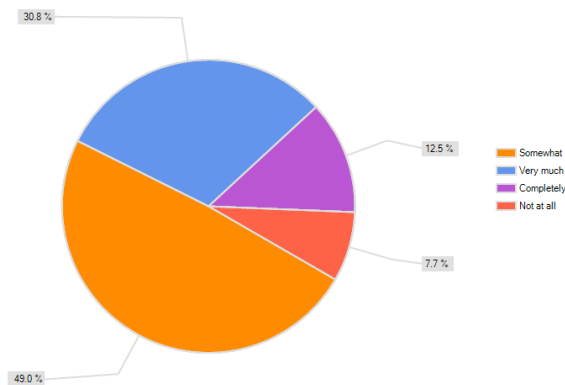
IMPACT OF CHANGE AGENT ATTENDANCE ON THE CHANGE AGENTS THEMSELVES

What about being a Change Agent has been most beneficial to you? Please mark all that apply.



IMPACT OF CHANGE AGENT ATTENDANCE ON THE CHANGE AGENTS THEMSELVES

Are you using the materials/information received at Change Agent meetings in your own agency?



OUR VALUES

1. Co-Occurring Capable/Competent
2. Trauma-Informed
3. Person-Centered Care
4. Culturally Intelligent
5. Recovery-Oriented (for both Person and System)
6. Service/System Integration
7. Stage-Matched Recovery Planning
8. Welcoming

MOVING FORWARD

- Continue to expand membership to broaden constituency representation
- Operationalize our principals – “Constructs/Values Document” in draft form and will be presented to Steering Committee, pending approval by Evaluation Subcommittee
- Continue to strive to get people what they need when they need it within one system of care.